

RECOVERY FUND CLAIM
ARIZONA STATE REGISTRAR OF CONTRACTORS
800 W. Washington, 5th Floor, Phoenix, AZ 85007
(602) 542-1525, Ext. 7730 or Toll-Free within Arizona 1-888-271-9286

PLEASE TYPE OR PRINT

ANSWER ALL QUESTIONS (See Instructions on Reverse Side)

Claim No. _____

FOR OFFICE USE ONLY

CLAIM FILED AGAINST:			
Contractor's Company Name _____			
License No. _____	Home Phone () _____		Business Phone () _____
Contractor's Address _____		City _____	Zip _____
CLAIM FILED BY:			
Claimant's Name _____		Home Phone () _____	
Claimant's Address _____		Work Phone () _____	
City _____	State _____	Zip _____	E-mail Address _____
Address/Location Where Work Performed _____			
Contract Date / / _____		Do you own and occupy the residence? Yes_____ No_____	
Written Contract? Yes_____ No_____		New Construction Project? Yes_____ No_____	
Verbal Contract? Yes_____ No_____		Remodel Project? Yes_____ No_____	
Date Work Began / / _____		Other Type Project? _____	
Amount of Contract \$ _____	Paid in Full? Yes_____ No_____		Balance Due \$ _____
Date contractor last performed work on the defective item(s) claimed / / _____			
Date contractor abandoned the project / / _____			
Close of Escrow Settlement Date / / _____		Move-In Date / / _____	
Pursuant to A.R.S. § 32-1136 you are required to notify the registrar if you have recovered any portion of your losses from other sources. Have you recovered any portion of your losses from the source(s) listed below?			
Contractor's Bond: _____		Yes_____ No_____	Amount \$ _____
Homeowner's Insurance: _____		Yes_____ No_____	Amount \$ _____
Other: _____		Yes_____ No_____	Amount \$ _____
Explain briefly the situation that transpired between you and the contractor. Attach additional sheets if necessary. An Inspector will contact you to schedule an appointment for the inspection of your property.			

Amount of losses you are claiming \$ _____

I VERIFY UNDER PENALTY OF LAW THAT THE STATEMENTS CONTAINED IN THIS CLAIM ARE TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF.

Claimant's Signature _____ Date _____

(Original)

(Revised April 2003)

INSTRUCTIONS FOR FILING A CLAIM UNDER A.R.S. § 32-1154(E)

THE FOLLOWING DOCUMENTS ARE REQUIRED TO PROCESS YOUR CLAIM. **FAILURE TO ENCLOSE THESE DOCUMENTS WILL CAUSE PROCESSING DELAYS!**

- [X] Copy of your original construction contract plus any addendums or change orders.**
- [X] Copies of documents that verify payment(s) made on the contract (examples):**
 - ☐ front and back sides of cancelled checks
 - ☐ close of escrow settlement statement including deed
 - ☐ executed lien release waivers
 - ☐ bank records of payment(s) made through construction draws or wire transfers
- [X] Three (3) itemized bids (copies) from licensed residential contractors to repair or complete the project.**
- [X] If repairs are already complete enclose copies of new contract(s) with licensed residential contractors, invoices, receipts and proof of payment as specified above.**

Enclose copies of all other supporting documentation for the registrar's review.

"Notwithstanding any other provisions in this chapter, if a contractor's **license has been revoked or has been suspended** as a result of an order to remedy a violation of this chapter and the contractor refuses or is unable to comply with the order of the registrar to remedy the violation, the registrar may order payment from the residential contractors' recovery fund to remedy the violation. The contractor or injured person may seek judicial review of the registrar's award under Title 12, Chapter 7, Article 6."

The fund is available to a person injured who is the **owner, occupant of residential property** who contracts with a residential licensed contractor as defined under A.R.S. § 32-1131(3).

An action which may result in collection from the fund **shall not be commenced later than two years** from the date of the commission of the act by the contractor that is the cause of the injury or from the date of occupancy.

A.R.S. § 32-1132(A) allows for a maximum payout of \$30,000.00 to an injured person, with \$200,000.00 as the maximum amount paid on any one residential contractor's license on judgments awarded after September 1, 2002. An award is limited to actual workmanship but shall not exceed an amount necessary to repair or complete. An award shall not be available to persons injured by a residential contractor whose license was in an **inactive status, expired, cancelled, revoked or suspended** at the time of the contract.

You may file this claim if the contractor is involved in a pending bankruptcy action **only if** relief has been granted by the Federal Bankruptcy Court allowing access to the Recovery Fund under A.R.S. § 32-1154(E).

The contractor must be notified by the agency of your recovery fund claim and has the right to request a hearing in this matter. The registrar may also ask for a hearing on your claim. If either party or you the claimant request a hearing, you will be notified of the time and date of the hearing. **Approximate time frame for actual disbursement of funds without convening a hearing is SIXTEEN WEEKS.** Claims are processed in the order in which they are received; however, claims are paid in the order of the date of entry of the order directing payment from the fund, by the registrar or a court.

The funds payable to the claimant are to be used to remedy the damages caused by the contractor. Any misuse of these funds may be considered fraudulent on your part and the registrar may initiate a court action against you.

Forward the **signed original of this form along with all required and supporting documentation to the Phoenix office.** Retain this copy for your records. For additional information visit our Website at: <http://www.azroc.gov/> or refer to the consumers' booklet, Handling a Dispute in Residential Construction. If further assistance is required contact the Recovery Fund directly at (602) 542-1525, ext. 7730, 7740 or toll-free within Arizona at 1-888-271-9286.